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CONFIRMATION NO. 4072

|                                    |   |                     |                               |  |
|------------------------------------|---|---------------------|-------------------------------|--|
| <b>SERIAL NUMBER</b><br>10/664,681 | <b>FILING OR 371(c)<br/>DATE</b><br>09/19/2003<br><b>RULE</b> | <b>CLASS</b><br>369 | <b>GROUP ART UNIT</b><br>2627 | <b>ATTORNEY DOCKET<br/>NO.</b><br>0007975-0042 |
|------------------------------------|---|---------------------|-------------------------------|--|

## APPLICANTS

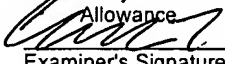
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Christophe Moser, Pasadena, CA;

## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/412,523 09/19/2002

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* \*\* SMALL ENTITY \*\*  
12/09/2003

|   |   |                                   |                                |                               |                                    |
|---|---|-----------------------------------|--------------------------------|-------------------------------|------------------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions<br>met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>Allowance<br>Verified and<br>Acknowledged | <br>Examiner's Signature<br>CRL<br>Initials | <b>STATE OR<br/>COUNTRY</b><br>CA | <b>SHEETS<br/>DRAWING</b><br>6 | <b>TOTAL<br/>CLAIMS</b><br>10 | <b>INDEPENDENT<br/>CLAIMS</b><br>1 |
|---|---|-----------------------------------|--------------------------------|-------------------------------|------------------------------------|

## ADDRESS

66498

## TITLE

High density optical data storage

|                                       |   |  |
|---------------------------------------|---|--|
| <b>FILING FEE<br/>RECEIVED</b><br>440 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of<br>time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
|---------------------------------------|---|--|